



# storyybrook

## Storyybrook SEMH Policy





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## 1. Statement of intent

Storybrook is a specialist SEMH provision which is passionate about making a difference to the lives of all of pupils, ensuring all of their needs are met, especially in relation to their emotional well-being and mental health. We are committed to ensuring that the school is at the centre of the community and a place where everyone feels safe and valued, offering confidential support and advice alongside a variety of interventions, to enable everyone to thrive.

We believe in working collaboratively with others in the school and wider school community, a range of professionals, and most importantly with the young people in our school. We work hard to support children and families with any adversity they may have experienced and help them to work through any issues or concerns in a supportive and nurturing environment. We recognise that everyone experiences different challenges in life and that they may require some additional support to help manage and work through this. We wholeheartedly believe in considering the needs of the whole child in all we do and therefore prioritise the social, emotional and mental health (SEMH) needs of any pupil at all times.

We are fully committed to making a difference; we work proactively with all stakeholders, particularly pupils and parents, to ensure we can create a robust and effective package of support for each individual child following a child-centred approach to support. These are a reflection of the school's curriculum intent statement and core values of belonging, respect, resilience, inclusion, integrity and love, in particular our aim to support the personal, social and spiritual development of every pupil throughout the school.

At Storybrook, we acknowledge our role in ensuring that children learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues, and where they can go if they need help and support. Our aim is to help develop the protective factors which build resilience to mental health problems and to be a school where:

- all children are valued
- children have a sense of belonging and feel safe
- children feel able to talk openly with trusted adults about their problems without feeling any stigma
- children's social, emotional, mental health and behaviour needs are recognised and understood
- support is readily available
- positive mental health is promoted and valued
- bullying is not tolerated

**Through the successful implementation of this policy, we aim to:**

- promote a positive outlook regarding pupils with SEMH difficulties.
- eliminate prejudice towards pupils with SEMH difficulties.
- promote equal opportunities for pupils with SEMH difficulties.
- ensure all pupils with SEMH difficulties are appropriately supported in our specialist setting - minimising the risk of SEMH difficulties escalating into physical harm.





**We will work with the Local Authority and other key stakeholders with regards to the following:**

- The involvement of pupils and their parents in decision-making, ensuring their thoughts, views and experiences are at the forefront of all we do
- The early identification of pupils' needs
- Collaboration between education, health and social care services to provide support when required
- Greater choice and control for pupils and their parents over their support

At Storybrook, SEMH is our main area of need and therefore we wish to work with everyone involved in the school to ensure that we prioritise positive mental health and well-being and that we have resources and interventions in place to support those who may be struggling with SEMH needs or difficulties.

**In order to ensure we are promoting positive mental health and well-being we:**

- have a supporting and nurturing ethos and culture that accords value and respect to all
- demonstrate a commitment to being responsive to children and young people's needs
- consider pupils needs and experiences when creating all policies and procedures, ensuring we are a truly inclusive setting
- set our clear guidelines for internal and external referrals, communicating these with all stakeholders ensuring they are updated on outcomes
- create strong links with external agencies to provide access to support and information
- Have a named Senior Mental Health Lead, Designated Teacher and Designated Safeguarding Lead, to ensure consistency in our approach to support; the member of staff responsible for all these roles is our Headteacher, Mrs Rachel Burbridge
- dedicate time to train staff in positively supporting SEMH difficulties and have a wide range of resources and interventions to support with these
- prioritise the well-being and mental health of all stakeholders when making any decisions to ensure we act in the best interests of everyone.

**We provide our pupils with:**

- opportunities to participate in activities that encourage belonging and self-esteem
- scheduled time each day to focus on personal, social, emotional development (PSED)
- regular opportunities to share their thoughts, views and feelings, informing planning and provision
- opportunities to celebrate academic and non-academic achievements.
- a broad and balanced curriculum designed to develop a sense of worth through taking responsibility for themselves and others and identifying their strengths and weaknesses in a safe and supportive manner
- adult role models who demonstrate positive and appropriate behaviours, interactions and ways of relating at all times
- quiet spaces to reflect on issues or incidents and discuss these with a familiar and trusted adult
- interventions and provision to meet their needs





- a specialist environment specifically created to support the needs of learners with SEMH needs

We hope that through our positive outlook and our dedication to developing well-rounded and secure children with positive mental health, that all of our pupils at Storybrook will have the best chance of success.

## 2. SEMH and Pastoral Team at Storybrook

We have an effective SEMH and Pastoral system in place so that every pupil is well known by at least one member of staff who can act as a listening ear and a mentor, and who can spot where dysregulated or unusual behaviour may need investigating and addressing. Every member of staff at Storybrook is specifically trained to support all learners with SEMH needs and this is included in staff induction and continuous professional development.

Key staff include:

- Mrs Rachel Burbridge - Headteacher, Senior Mental Health Lead, Designated Teacher for LAC and PLAC and Designated Safeguarding Lead
- Mrs Rachel Tetchner - Deputy Headteacher, SENDCo and Deputy Designated Safeguarding Lead
- ELSA HLTA
- Mrs Louise Sullivan - SEND and Inclusion (SEMH) Governor

All staff in the school work alongside this team to ensure that children feel welcomed, seen and supported, and offer guidance and communication for families wherever needed.

## 3. Legal Framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Health and Social Care Act 2012
- Equality Act 2010
- Education Act 2002
- Mental Capacity Act 2005
- Children Act 1989

**The school will make reasonable adjustments in accordance with the Equality Act 2010 to ensure pupils with SEMH needs are not disadvantaged.**

This policy has been created with regard to the following DfE guidance:

- DfE (2021) 'Keeping children safe in education'
- DfE (2018) 'Mental health and behaviour in schools'
- DfE (2016) 'Counselling in schools: a blueprint for the future'
- DfE (2015) 'Special educational needs and disabilities code of practice: 0 to 25'

This policy also has due regard to the school's policies including, but not limited to, the following:





- Safeguarding and Child Protection Policy
- Special Educational Needs and Disability Policy
- Behaviour and Relationships Policy
- Accessibility and Inclusion Policy
- Supporting Pupils with Medical Conditions Policy
- Staff Code of Conduct
- Exclusions and Suspensions Policy

#### **4. Introduction to SEMH: Types of difficulties and potential causes (including ACEs)**

Social, emotional, mental health (SEMH) is a term that was introduced in the Special Educational Need and Disabilities (SEND) Code of Practice in 2014. It refers to children who are struggling with emotional regulation and mental health difficulties that may impact their lives at school and home, considering social and academic settings. The World Health Organisation, 2021, explain that “Mental health is a state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.” At the time this was published, it was reported that 1 in 6 children had experienced some level of mental health difficulties and therefore it is essential that schools work with all stakeholders to prioritise identifying and supporting these needs.

Pupils with SEMH experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging and/ or dysregulated behaviours. These sometimes reflect underlying mental health difficulties such as anxiety and depression, self-injury, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other pupils may have disorders such as attention deficit disorder (ADD), attention deficit hyperactivity disorder (ADHD) or attachment disorder.

SEMH was previously known as SEBD - Social, emotional, behavioural difficulties - however ‘behaviour’ was removed as a distinct SEND Category for the 2014 Code of Practice, under the assumption that behaviour is a means of communicating an unmet need in one or more of the categories of SEND (i.e. broad areas of need - Social Emotional and Mental Health needs, Communication and interaction needs, Cognition and Learning needs or Sensory and/or Physical Needs).

At Storybrook, we fully believe that when children are displaying any challenging or concerning behaviour, that they are reaching out to us for support and therefore it essential that help is put in place to regulate the child and help meet the needs they are facing. To us, behaviour is communication and we are eager to understand what the child needs. Storybrook recognises that positive and robust support is necessary to enable each child to progress and feel safe.

We believe that some children require additional intervention, above our ordinarily available provision offer within a specialist SEMH setting, to help them to develop the necessary skills to manage their behaviour, much like some children benefit from academic intervention, and that any behaviour incident is a learning opportunity. This is why we have a real focus on creating a relational, pupil-centred approach to behaviour support, helping us to create





a collaborative and nurturing environment for all.

To find out more about our behaviour approach, please refer to our Behaviour and Relationships Policy on the school website.

Some examples of SEMH needs are:

- **Depression** - affects more children and young people today than in the last few decades. Teenagers are more likely to experience depression than young children.
- **Anxiety** - refers to feeling fearful or panicked, breathless, tense, fidgety, sick, irritable, tearful or having difficulty sleeping. Anxiety can significantly affect a pupil's ability to develop, learn and sustain and maintain friendships. Specialists reference the following diagnostic categories:
- **Self-harm** - a very common problem among young people. Some people who experience intense emotional pain may try to deal with it by hurting themselves.
- **Post-traumatic stress disorder (PTSD)** - often follows physical or sexual abuse, witnessing something extremely frightening or traumatising, being the victim of violence or severe bullying or surviving a disaster.
- Children who are consistently overactive, impulsive and have difficulty paying attention may have **Attention Deficit Hyperactivity Disorder (ADHD)**.
- **Eating disorders** - these usually start in the teenage years and are more common in girls than boys. The number of young people who develop an eating disorder is small. Still, eating disorders such as anorexia nervosa and bulimia nervosa can have serious consequences on their physical health and development.
- **Separation anxiety disorder** - this involves worrying about being away from home or someone close to the child i.e. their parent/ carer, at a level that is much more severe than normal for a pupil's age.
- **Attachment disorders** - can see children finding it challenging to create emotional attachments with others including adults and their peers. It can also make it difficult for children to maintain positive relationships with others.

The most common causes of SEMH are believed to include the following:

- **Attachment difficulties** (lack of acceptance /needs being met /emotional warmth / positive feedback / managing emotional response by caregiver)
- **Trauma history** (domestic violence, abuse, neglect, bullying, violent crime, social exclusion, hate prejudice, loss)
- Current challenging family dynamics
- Other **systems** around the child (school, community, society).
- Adverse Childhood Experiences (ACEs)

### 5. Adverse Childhood Experiences including 'Risk factors and Protective factors'

Adverse Childhood Experiences (ACEs) are “highly stressful, and potentially traumatic, events or situations that occur during childhood and/or adolescence. They can be a single event, or prolonged threats to, and breaches of, the young person's safety, security, trust or bodily integrity.” (Young Minds, 2018). Many people experience ACEs but the individual impact, amount of time endured, severity and number of these can significantly affect a person's





physical and mental health.

**Examples of ACEs:**

- Physical abuse
- Sexual Abuse
- Emotional Abuse
- Living with someone who abused drugs
- Living with someone who abused alcohol
- Exposure to domestic violence
- Living with someone who has gone to prison
- Living with someone with serious mental illness
- Losing a parent through divorce, death or abandonment

When a child’s ‘Risk Factor’ increases due to exposure to the above, and their ‘Protective Factors’ decrease, they are at more risk of harm and future complications and difficulties linked to their ACEs.

The NHS have reported that 1 in 3 mental health problems are directly linked to ACEs. Therefore, it is essential that young people have support in place as early as possible to work through these difficulties and give them the best chance of future success.

At Storyybrook, we are very aware of the importance of understanding ACEs and have dedicated a considerable amount of time to train our staff, when planning our professional development and induction sessions, focusing on these. This is to ensure our staff are well-equipped with dealing with any difficulties or needs that may arise from these experiences.

**6. Risk and Protective Factors**

The DfE explain that “There are a number of risk factors beyond being part of a vulnerable group that are associated with an increased likelihood of SEMH difficulties, these are known as risk factors. There are also factors associated with a decreased likelihood of SEMH difficulties, these are known as protective factors.” As mentioned, everyone has both of these in their lives but the balance of these can influence their risk of harm and/or future SEMH needs.

The table below displays common risk factors for SEMH difficulties (as outlined by the DfE):

	Risk factors	Protective factors
In the pupil	<ul style="list-style-type: none"> <li>• Genetic influences</li> <li>• Low IQ and learning disabilities</li> <li>• Specific development delay or neuro-diversity</li> <li>• Communication difficulties</li> <li>• Difficult temperament</li> <li>• Physical illness</li> <li>• Academic failure</li> <li>• Low self-esteem</li> </ul>	<ul style="list-style-type: none"> <li>• Secure attachment experience</li> <li>• Outgoing temperament as an infant</li> <li>• Good communication skills and sociability</li> <li>• Being a planner and having a belief in control</li> <li>• Humour</li> <li>• A positive attitude</li> <li>• Experiences of success and</li> </ul>





		<ul style="list-style-type: none"> <li>achievement</li> <li>Faith or spirituality</li> <li>Capacity to reflect</li> </ul>
<b>In the pupil's family</b>	<ul style="list-style-type: none"> <li>Overt parental conflict including domestic violence</li> <li>Family breakdown (including where children are taken into care or adopted)</li> <li>Inconsistent or unclear discipline</li> <li>Hostile and rejecting relationships</li> <li>Failure to adapt to a child's changing needs</li> <li>Physical, sexual, emotional abuse, or neglect</li> <li>Parental psychiatric illness</li> <li>Parental criminality, alcoholism or personality disorder</li> <li>Death and loss - including loss of friendship</li> </ul>	<ul style="list-style-type: none"> <li>At least one good parent-child relationship (or one supportive adult)</li> <li>Affection</li> <li>Clear, consistent discipline</li> <li>Support for education</li> <li>Supportive long-term relationships or the absence of severe discord</li> </ul>
<b>In the school</b>	<ul style="list-style-type: none"> <li>Bullying including online (cyber bullying)</li> <li>Discrimination</li> <li>Breakdown in or lack of positive friendships</li> <li>Deviant peer influences</li> <li>Peer pressure</li> <li>Peer-on-peer abuse</li> <li>Poor pupil-to-teacher/school staff relationships</li> </ul>	<ul style="list-style-type: none"> <li>Clear policies on behaviour and bullying</li> <li>Staff behaviour policy (also known as code of conduct)</li> <li>'Open door' policy for children to raise problems</li> <li>A whole-school approach to promoting good mental health</li> <li>Good pupil-to-teacher/school staff relationships</li> <li>Positive classroom management</li> <li>A sense of belonging</li> <li>Positive peer influences</li> <li>Positive friendships</li> <li>Effective safeguarding and child protection policies.</li> <li>An effective early help process</li> <li>Understand their role in, and are part of, effective multi-agency working</li> <li>Appropriate procedures in place to ensure staff are confident enough to raise concerns about policies and processes and know they will be dealt with fairly and effectively</li> </ul>
<b>In the community</b>	<ul style="list-style-type: none"> <li>Socio-economic disadvantage</li> <li>Homelessness</li> </ul>	<ul style="list-style-type: none"> <li>Wider supportive network</li> <li>Good housing</li> </ul>





	<ul style="list-style-type: none"> <li>• Disaster, accidents, war or other overwhelming events</li> <li>• Discrimination</li> <li>• Exploitation, including by criminal gangs and organised crime groups, trafficking, online abuse, sexual exploitation and the influences of extremism leading to radicalisation</li> <li>• Other significant life events</li> </ul>	<ul style="list-style-type: none"> <li>• High standard of living</li> <li>• High morale school with positive policies for behaviour, attitudes and anti-bullying</li> <li>• Opportunities for valued social roles</li> <li>• Range of sport/leisure activities</li> </ul>
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As per the DfE guidelines, all “staff [must] remain vigilant of [the above], and the protective factors that staff look for and notice when missing from a pupil.”

All staff must act in accordance with Keeping Children Safe in Education (KCSIE) and recognise that SEMH presentations may indicate underlying safeguarding concerns, including abuse, neglect or exploitation.

**7. Roles and Responsibilities**

The Department for Education (DfE) recognises that “in order to help their child succeed, schools have a role to play in supporting them to be resilient and mentally healthy.” The World Health Organisation’s definition of mental health and wellbeing “a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her own community.” Schools can be a place for children and young people to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience.

At Storybrook, all staff understand the importance of supporting pupils when SEMH needs have been identified. It is the responsibility of all staff to encourage, support and listen to our pupils and family, creating a safe space for them to communicate and work with us. Every member of staff receives training on mental health and SEMH needs, and are given suggestions and strategies on how they can support those in our community experiencing difficulties relating to these. Every staff member will have reviewed the SEMH policy and have received relevant training on identifying further support for required for the pupils within our specialist setting.

We believe that all staff have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health. Some children will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that children with mental health needs get early intervention and the support they need.

All staff are in a position of trust and must not engage in any behaviour which may constitute an abuse of that position; this is essential for pupil’s mental health and well-being and is a legal requirement.





All safeguarding concerns arising from SEMH presentations must be reported immediately in line with the Safeguarding and Child Protection Policy, with no delay.

**All members of staff will ensure they follow the steps below when supporting a child who is expressing any SEMH concerns:**

always show understanding and compassion when a pupil is speaking with you about their concerns, never dismissing their reasons as invalid

encourage students to be open with you and reassure them that they can get the help they need if they are willing to talk.

don't make promises that can't be kept regarding confidentiality - this is in line with our Safeguarding and Child Protection Policy which states that staff must:

- listen carefully and ensure the child does not feel rushed
- let them know they are your priority
- report the matter to a designated key member of staff as you become aware of the problem and inform the student that you are doing this

All concerns must be recorded accurately, objectively and in a timely manner in accordance with school procedures.

Any safeguarding concerns should be referred to Mrs Rachel Burbridge, Headteacher and Designated Safeguarding Lead, in the first instance, or Mrs Rachel Tetchner, Deputy Headteacher and Deputy Designated Safeguarding Lead, in the second instance. Where the DSL or DDSL is unavailable, staff must take immediate action by following the safeguarding flowchart, including contacting children's social care or emergency services where there is a risk of immediate harm.

Where concerns relate to senior leaders or are not appropriately addressed, staff must escalate concerns to the governing body, Local Authority Designated Officer (LADO), or other relevant external agencies.

**The Headteacher is responsible for:**

- ensuring that those teaching or working with pupils with SEMH difficulties are aware of their needs and have arrangements in place to meet them.
- ensuring that teachers monitor and review pupils' academic and emotional progress during the course of the academic year.
- ensuring that the SENDCO has sufficient time and resources to carry out their functions, in a similar way to other important strategic roles within the school.
- reviewing the quality of teaching for pupils at risk of underachievement, as a core part of the school's performance management arrangements (this will be at least annually)
- ensuring that staff members understand the strategies used to identify and support pupils with SEMH difficulties.
- ensuring that procedures and policies for the day-to-day running of the school do not directly or indirectly discriminate against pupils with SEMH difficulties.
- establishing and maintaining a culture of high expectations and including pupils with SEMH difficulties in all opportunities that are available to other pupils.





- consulting health and social care professionals, pupils and parents to ensure the needs of pupils with SEMH difficulties are effectively supported.
- keeping parents/ carers and relevant staff up-to-date with any changes or concerns involving pupils with SEMH difficulties.
- ensuring staff members have a good understanding of the mental health support services that are available in their local area, both through the NHS and voluntary sector organisations.

**Senior Leadership Team (SLT) are responsible for:**

- overseeing all SEMH support including processes, procedures and policies and work with a number of other stakeholders and agencies to ensure that Storybrook has a good offer of support for all of the pupils in the setting
- creating a safe and calm environment, where mental health problems are less likely to occur, the leadership can improve the mental health and wellbeing of the school community and instil resilience in pupils. A preventative approach includes teaching pupils about mental wellbeing through the curriculum, including through our work on mindfulness and emotional regulation (using The Zones of Regulation), and reinforcing these messages in our activities and ethos
- identifying mental health and wellbeing difficulties through equipping staff with the knowledge required for early and accurate identification of emerging problems
- providing early support for pupils experiencing mental health and wellbeing difficulties. This can be achieved by raising awareness and employing efficient referral processes, the school's leadership can help pupils access evidence-based early support and interventions
- accessing specialist support to assist pupils with mental health and wellbeing difficulties by ensuring school provide a range of supportive interventions and through regular communication with other agencies. Working effectively with external agencies such as CAMHS and the Mental Health Support Team, the school can provide swift access or referrals to specialist support and treatment, where appropriate
- identifying and supporting pupils with SEND. As part of this duty, the school's leadership considers how to use some of the SEND resources and provisions to provide support for pupils with mental health difficulties that amount to SEND
- identifying where wellbeing concerns represent safeguarding concerns. Where mental health and wellbeing concerns could be an indicator of abuse, neglect or exploitation, the school will ensure that appropriate safeguarding referrals are made in line with the Safeguarding and Child Protection Policy
- clearly communicating their vision for good mental health and wellbeing with the whole school community
- utilising various strategies to support pupils who are experiencing high levels of psychological stress, or who are at risk of developing SEMH problems, including:
  - teaching about mental health and wellbeing through the curriculum, including (but not exclusive to): PSHE, RSE, resilience, mindfulness, emotional regulation (through The Zones of Regulation) and social skills.
- ensuring the Behaviour and Relationships Policy highlights the importance of positive classroom management and that this is monitored and reviewed regularly and includes





measures to prevent and tackle bullying, and contains an individualised, graduated approach when behaviour may be the result of mental health needs or other vulnerabilities

- working with parents to identify any potential SEMH needs and creating plans of support around these
- ensuring that there are clear policies and processes in place to reduce stigma and make pupils feel comfortable enough to discuss mental health concerns.
- communicating all of the above so pupils know where to go for further information and support should they wish to talk about their mental health needs or concerns over a peer's or family member's mental health or wellbeing.

#### **The governing body and proprietor are responsible for:**

- ensuring an SEMH policy is in place that reflects the school's values and vision
- fully engaging pupils with SEMH difficulties and their parents when drawing up policies that affect them (at Storyybrook, this will be the majority of policies)
- identifying, assessing and organising provision for all pupils with SEMH difficulties, whether or not they have an EHC plan (EHCP)
- endeavouring to secure the special educational provision called for by a pupil's SEMH difficulties, including that which is above and beyond the school's normal offer
- designating an appropriate member of staff to be the SENDCO and coordinating provisions for pupils with SEMH difficulties
- taking all necessary steps to ensure that pupils with SEMH difficulties are not discriminated against, harassed or victimised
- ensuring arrangements are in place to support pupils with SEMH difficulties within our specialist setting
- appointing an individual governor or sub-committee to oversee the school's arrangements for SEMH
- ensuring there are clear systems and processes in place for identifying possible SEMH problems (beyond those which have been identified prior to admission), including routes to escalate and clear referral and accountability systems

#### **The Designated Senior Mental Health Lead (SMHL) is responsible for:**

- overseeing the whole-school approach to mental health, including how this is reflected in policies, the curriculum and pastoral support, how staff are supported with their own mental health, and how the school engages pupils and parents with regards to pupils' mental health and awareness
- collaborating with the governing body and proprietor, and considering their qualification as SENDCo and SMHL, to outline and strategically develop SEMH policies and provisions for the school
- drawing their knowledge from their role as a trained SENDCo and Designated Safeguarding Lead to ensure there is a high standard of care to pupils who have SEMH difficulties
- acting in collaboration with mental health support workers who are trained professionals who act as a bridge between schools and mental health agencies.
- advising on the deployment of the school's budget and other resources in order to





- effectively meet the needs of pupils with SEMH difficulties
- being a key point of contact with external agencies, especially the mental health support services, the LA, LA support services and mental health support teams
  - providing professional guidance to colleagues about mental health and working closely with staff members, parents and other agencies, including SEMH charities
  - referring pupils with SEMH difficulties to external services, e.g. specialist children and young people's mental health services (CAMHS), to receive additional support where required
  - overseeing the outcomes of interventions on pupils' education and wellbeing
  - liaising with parents/ carers of our pupils, wherever appropriate, in order to support their SEMH needs and well-being
  - liaising with other schools, educational psychologists, health and social care professionals, and independent or voluntary bodies
  - liaising with the potential future providers of education, such as secondary school teachers, to ensure that pupils and their parents are informed about options and a smooth transition is planned
  - leading mental health CPD
  - collaborating with the governing body and other key members of staff, to determine the strategic development of SEMH policies and provisions in the school
  - undertaking day-to-day responsibilities for the successful operation of the SEMH Policy
  - supporting Class Teachers in the further assessment of a pupil's particular strengths and areas for improvement and advising on the effective implementation of support

**Teaching staff are responsible for:**

- being aware of the signs of SEMH difficulties and how these may change and evolve over time
- being aware of the different types of SEMH need and keeping up-to-date with information on these
- planning and reviewing support for their pupils in collaboration with parents/ carers, the SENDCO and, where appropriate, the pupils themselves.
- setting high expectations for every pupil and aiming to teach them the full curriculum, whatever their prior attainment
- planning lessons to address potential areas of difficulty to ensure that there are no barriers to every pupil achieving their full potential, and that every pupil within our specialist setting will be able to study the full national curriculum
- being responsible and accountable for the progress and development of the pupils in their class
- being aware of the needs, outcomes sought and support provided to all pupils within our setting who have identified SEMH difficulties (this will be all pupils)
- keeping the Senior Leadership Team up-to-date with any changes in behaviour, academic developments and causes of concern

This policy is informed by Part 2 of Keeping Children Safe in Education (KCSIE), which sets out expectations for staff conduct, including maintaining professional boundaries and acting





in the best interests of pupils. Failure to adhere to this policy may result in disciplinary action in line with the Staff Code of Conduct and Disciplinary Policy.

## 7. Identifying signs of SEMH

Storybrook is committed to identifying pupils specific SEMH difficulties at the earliest stage possible. Staff are trained to know how to identify possible mental health problems and understand what to do if they spot signs of emerging difficulties. All pupils admitted to Storybrook will have recognised SEMH needs; however, these may present differently for each pupil, and may also change over time.

When the school suspects that a pupil is experiencing mental health difficulties, the following graduated approach is employed:

- The Class Teacher must work with the child to gather information and create a plan of in-class support in the first instance. They should adapt their ordinarily available provision to account for the child's needs and include this on their Individual Education Support Plan.
- Should the child continue to struggle with the support in place, the Class Teacher should liaise with the SENDCo for any further recommendations, resources or strategies they may need. Class Teachers must inform the Senior Mental Health Lead and SENDCo of their concerns for our records. Parents/ carers will be notified of the concerns and support and their views will be sought, along with those of their child.
- Actions from the planned support undertaken i.e. referral to Mental Health Support Team, in- house interventions, external interventions, observation/ assessment from external agency in line with the Local Offer, etc
- Plan and actions reviewed each term (or more regularly should concerns be significant) to assess the effectiveness of the provision, make any necessary changes and create new outcomes.

### **Staff members are aware of:**

- factors that put pupils at risk of SEMH difficulties, such as low self-esteem, physical illnesses, academic difficulties and family problems
- risks that are cumulative and that exposure to multiple risk factors can increase the risk of SEMH difficulties
- the fact that familial loss or separation, significant changes in a pupil's life or traumatic events are likely to cause SEMH difficulties
- indicators that may point to SEMH difficulties, such as behavioural problems, pupils distancing themselves from other pupils or changes in attitude
- challenging behaviours, ensuring these are managed in line with the school's Behaviour and Relationships Policy and are considered as a means of communication in most instances
- pupil progress and development. Pupils' data is reviewed on a regular basis by Achievement Leads so that patterns of attainment, attendance or behaviour are noticed and can be acted upon if necessary
- the reality that some groups of pupils are more vulnerable to mental health difficulties





than others; these include LAC, pupils with SEND (all pupils at Storyybrook) and pupils from disadvantaged backgrounds

- the signs that may indicate if a pupil is struggling with their SEMH. The signs of SEMH difficulties may include, but are not limited to, the following list:
  - Anxiety
  - Low mood
  - Being withdrawn
  - Avoiding risks
  - Unable to make choices
  - Low self-worth
  - Isolating themselves
  - Refusing to accept praise
  - Failure to engage
  - Poor personal presentation
  - Lethargy/apathy
  - Daydreaming
  - Unable to make and maintain friendships
  - Speech anxiety/reluctance to speak
  - Task avoidance
  - Challenging behaviour (including verbal and physical aggression)
  - Restlessness/over-activity/ impulsivity
  - Non-compliance
  - Mood swings
  - Perceived injustices
  - Disproportionate reactions to situations
  - Difficulties with change/transitions
  - Absconding
  - Eating issues
  - Lack of empathy
  - Lack of personal boundaries
  - Poor awareness of personal space

### **8. Vulnerable groups including Children in need, LAC and previously LAC (PLAC)**

Some pupils are particularly vulnerable to SEMH difficulties. These ‘vulnerable groups’ are more likely to experience a range of adverse circumstances that increase the risk of mental health problems. At Storyybrook, we ensure that all staff are aware of the increased likelihood of SEMH difficulties in pupils in vulnerable groups and remain vigilant to early signs of difficulties.

Vulnerable groups include the following:

- Pupils who have experienced abuse, neglect, exploitation or other adverse contextual circumstances
- Children in need
- Looked after children (LAC)
- Previously LAC (PLAC)





- Socio-economically disadvantaged pupils, including those in receipt of, or previously in receipt of, free school meals and the pupil premium

These circumstances can, but do not always, have a far-reaching impact on behaviour and emotional states. These factors will be considered when discussing the possible exclusion of vulnerable pupils.

### **Children in need, LAC and previously LAC (PLAC)**

Children in need, LAC and PLAC are more likely to:

- have SEND and experience mental health difficulties than their peers
- struggle with executive functioning skills, forming trusting relationships, social skills, managing strong feelings, sensory processing difficulties, foetal alcohol syndrome and coping with change

They may also be living in chaotic circumstances and be suffering, or at risk of, abuse, neglect and exploitation. They are also likely to have less support available outside of school than most pupils.

Therefore, it is crucial that school staff are aware of how these pupils' experiences and SEND can impact their behaviour and education. The impact of these pupils' experiences is reflected in the design and application of the school's Behaviour and Relationships Policy, including through individualised graduated responses, and follows a relational and child-centred approach to support and provision (please see appendix 2).

Where a pupil is being supported by LA Children's Social Care (CSC), the school works with their allocated social worker to better understand the pupil's wider needs and contextual circumstances. This collaborative working informs assessment of needs and enables prompt responses to safeguarding concerns.

When the school has concerns about a looked-after or previously child's behaviour, the Designated Teacher (Mrs Rachel Burbridge) and Virtual School Head (VSH) are informed at the earliest opportunity so they can help to determine the best way to support the pupil, including giving advice to school staff and/or parents/ carers.

### **9. SEND and SEMH**

As mentioned, many children struggling with their mental health are identified as having SEMH needs and will be supported by all staff for these. All pupils attending Storybrook will have identified SEND with SEMH as their primary are of need.

Storybrook recognises it is essential to not only take the information we are given at the admissions stage, but also to identify further SEND, including additional SEMH needs, at an early stage. The schools works with partner agencies to address these needs. The school's full SEND identification and support procedures are available in the Special Educational Needs and Inclusion Policy, found on our school website.

The Headteacher and Deputy Headteacher (SENDCo) will work closely with staff to: ensure that they understand how the school identifies and meets pupils' needs; provide advice and support for individuals or groups with additional needs; liaise with external SEND professionals as necessary; create and review all policies and procedures surrounding SEND.





Where pupils have certain types of SEND, there is an increased likelihood of mental health problems. For example, children with autism or learning difficulties are significantly more likely to experience anxiety. Children with learning disabilities are 6 times more likely to have mental health problems. Children with long-lasting physical disabilities are twice as likely to suffer emotional or behavioural issues. Issues may include: Diagnostic overshadowing, multiple diagnoses/co-morbidity.

Alongside this, some pupils have extensive and ongoing mental health difficulties which require a range of supportive actions to address.

As per the SEND Code of Practice 2015 and our school's SEND policy, we recognise the importance of early intervention when addressing the underlying causes of concerning or challenging behaviour and will always work with families to ensure the appropriate support is in place to address the pupil's SEND. As outlined in our SEND policy, the graduated response is used to determine the correct level of support to offer and this will be reviewed regularly with all key stakeholders.

### **10. SEMH intervention and support**

Storybrook is a specialist SEMH setting that believes the mental health and well-being support starts in the classroom. Therefore, we are passionate about ensuring our curriculum is inclusive, informative and inspiring for all. We have some lessons and interventions dedicated to small groups and individuals, where appropriate, but our work on supporting positive mental health and well-being is threaded through all we do and is our top priority at all times. The school will make reasonable adjustments in accordance with the Equality Act 2010 to ensure pupils with SEMH needs are not disadvantaged.

At Storybrook, all behaviour is understood as a form of communication; however, staff must also recognise that some behaviours may present a risk to the pupil themselves or to others. In such cases, the safety of all individuals is the priority. Staff must follow the school's Behaviour and Relationships Policy and Use of Reasonable Force and Restrictive Interventions Policy at all times when responding to risk.

Staff are not expected to manage high-risk situations independently and must seek support from a trained member of staff or senior leader where there is a risk of harm. Any physical intervention must be reasonable, proportionate and in line with statutory guidance and school policy, and must always be recorded and reviewed. Any use of reasonable force will be in accordance with Section 93 of the Education and Inspections Act 200, and must be recorded in line with school procedures; for more information, please refer to the school's Use of Reasonable Force and Other Restrictive Interventions Policy on our website.

All incidents involving risk must be reported in line with safeguarding procedures, recognising that dysregulated behaviour may indicate underlying safeguarding concerns.

**Through the curriculum, pupils are taught how to:**

- build self-esteem and a positive self-image
- foster the ability to self-reflect and problem-solve
- protect against self-criticism and social perfectionism
- foster self-reliance and the ability to act and think independently





- create opportunities for positive interaction with others
- get involved in school life and related decision-making

Our PSHE scheme in particular covers a range of different topics relating to mental health and well-being, including resilience, self-esteem, mindfulness, friendships and relationships, growth mindset and emotional regulation, and children have at least one lesson per week on this. At times when any mental health, well-being, social or emotional issues are identified as a class or school, the number of sessions may increase to ensure children are receiving support and educate surrounding these important topics, in a timely manner.

Through our daily timetable we focus on dedicated personal, social and emotional development for our pupils. Alongside this, we do ongoing work throughout each day to enable pupils to better regulate and advocate for themselves.

At Storybrook, we use The Zones of Regulation. This is used across the entire school and is taught both discretely and throughout all other aspects of the school curriculum and school day. All staff members receive initial training in The Zones of Regulation and we are going to continue developing this throughout the remainder of the academic year. For those children who need more support in emotional regulation, interventions are set up to do some more targeted work on this.

At Storybrook, SEMH is our primary area of need and therefore we have spent a considerable amount of time reviewing our support and interventions offer. We have a wide range of interventions available for our pupils with SEMH, outlined in the table below. These are reviewed and regularly, ensuring impact has been assessed and measured; this happens on a 12-weekly cycle for most interventions and outcomes are shared with parents/ carers and relevant school staff.

<b>Interventions available:</b> <ul style="list-style-type: none"> <li>• Lego Therapy</li> <li>• ELSA</li> <li>• Zones of Regulation</li> <li>• Play therapy</li> <li>• Drawing and Talking Therapy</li> <li>• Therapeutic learning support in the morning</li> <li>• Emotional check-ins</li> </ul>	<b>Baselines/ assessments:</b> <ul style="list-style-type: none"> <li>• SQDs (teacher and key staff member)</li> <li>• Restore SDQ</li> <li>• Boxall Profiles</li> <li>• Readiness to Learn scale</li> <li>• Motional</li> </ul>
	<b>Measuring impact:</b> Staff/ parent/ child feedback, ABCs, boxall scores reduction of incidents on CPOMS, ELSA teacher/ parent target-setting form  Motional





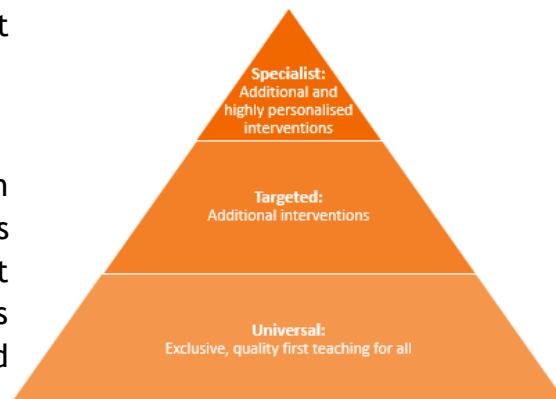
To find out more about how we manage interventions and progress, please see our Special Educational Needs and Inclusion policy on the school website.

**Summary of school offer:**

At Storybrook, there are different levels of support planned for, considering the needs of the children.

Our offer of provision starts at the

universal level which is what is offered to all children through quality first teaching; the next level is targeted support which may in-class or independent strategies or access to a toolkit to meet the child’s needs; lastly is specialist which is where specific and personalised support is implemented.



The table below shows the provision we offer at each stage.

<b>Universal</b>
<ul style="list-style-type: none"> <li>• PSHE lessons</li> <li>• PE lessons with a focus on healthy mind, healthy body</li> <li>• Relational approach to behaviour support as outlined in our Behaviour and Relationships Policy</li> <li>• Mindfulness sessions</li> <li>• Zones of Regulation whole class support and check ins daily</li> </ul>
<b>Targeted</b>
<ul style="list-style-type: none"> <li>• Calm spaces set up in each classroom for all children to access when needed</li> <li>• Sensory/ mindfulness resources available in each class</li> <li>• Worry boxes for children to access when needed</li> <li>• Packs of regulation strategies i.e. breathing exercises available</li> </ul>
<b>Specialist</b>
<ul style="list-style-type: none"> <li>• Lego Therapy</li> <li>• ELSA</li> <li>• Zones of Regulation</li> <li>• Play therapy</li> <li>• Canine Therapy</li> <li>• Drawing and Talking Therapy</li> </ul>

**11. Working with local services**

In some case a pupil’s mental health needs require support from a specialist service. These might include anxiety, depression, self-harm and eating disorders. We have access to a range of specialist services and during the support will have regular contact with the service to review the support and consider next steps, as part of graduated approach (please see





appendix 2).

School referrals to a specialist service will be made by the Senior Mental Health Lead or SENDCo following the assessment process and in consultation with the pupil and their parents/carers. Referrals will only go ahead with the consent of the pupil and parent/carer and when it is the most appropriate support for the pupil's specific needs. This is always the case except where safeguarding concerns require information sharing without consent.

As part of our SEMH policy and provision, Storybrook commissions appropriately trained, supported, supervised, and insured external providers who work within agreed policy frameworks and standards and are accountable to a professional body with a clear complaints procedure, when appropriate. In our setting, the majority of the support offered by these services takes place within the school building during school hours. More information on local services can be found through the Local Offer: <https://www.bracknell-forest.gov.uk/children-and-family-services/special-educational-needs-and-disability/send-local-offer>.

When a child requires additional support, be it referrals, assessments or therapy, from other agencies, Storybrook work hard to facilitate this, whilst working alongside the child and their family. This would usually take place once the school have put in a range of support and intervention to try and meet need, and only if the child was making less than desired progress or their needs/ difficulties increased. This support may come in the form of:

- a referral to the Mental Health Support Team for advice, parenting courses/ information session, assessment of need
- a referral to the Educational Psychology Team for an observation and/ or assessment of need
- a referral to CAMHS for an assessment of need
- a referral to behaviour specialist teams for advice, observation and recommendations of support with a focus on behaviour

If a child's needs are significant and ongoing, Storybrook may work with the LA SEN team on sourcing some additional therapeutic or behaviour support, including alternative provision, additional trained adults working with pupils 1.1, or individual training/ intervention from other provisions or providers.

## 12. Community Links

As mentioned in our statement of intent, Storybrook is passionate about working with the wider community. We do this by collaborating with different groups in the local area, such as:

- Early Help
- Community/ school nursing team
- Kerith Community Church food bank - please get in touch with the school office for further information on how we can support with this
- The Cowshed (support with clothing, bedding, and other household essentials) - please get in touch with the school office for further information on how we can support with this





- Social Prescribers - more information found here:  
<https://www.england.nhs.uk/personalisedcare/social-prescribing/>

### **13. Involving Parents/Carers in Promoting Mental Health**

At Storybrook, we recognise the important role parents/ carers have in promoting and supporting the mental health and wellbeing of their children, and in particular supporting children who do have mental health needs. We ask parents to inform us of any mental health needs their child has and any issues that they think might have an impact on their child's mental health and wellbeing, based on a list of risk factors pertaining to the child or family. It is very helpful if parents and carers can share information with the school so that we can better support their child from the outset. All information will be treated in confidence.

The initial process for this will be during admissions discussions. However, should any new or different needs emerge, we ask that parents/ carers communicate these with school as soon as possible so we are able to support their child effectively and in a timely manner.

All information provided by parents/ carers will be handled in accordance with data protection legislation, including the UK GDPR and Data Protection Act 2018.

**To support parents and carers we:**

- organise coffee mornings in-house, sometimes with the help of external professionals such as staff from the Mental Health Support Team (where possible), which focus on ways to actively build children's self- esteem and confidence
- provide and circulate information and websites focusing on mental health issues and local wellbeing and parenting programmes and have produced leaflets for parents on mental health and resilience, which can be accessed on the school website

We are aware that parents/ carers react in different ways to knowing their child has a mental health problem and we will be sensitive and supportive. We also aim to reassure by explaining that mental health problems are common, that the school has experience of working with similar issues and that help and advice are available. As a specialist SEMH provision we are established to work with children struggling with their mental health and have a strong offer of support for all pupils.

**When a concern has been raised, the school will:**

- contact parents/ carers and meet with them to discuss concerns and next steps
- offer information to take away and places to seek further information
- be available for follow up calls
- take a record of the meeting and share this with all involved
- agree a plan to support the child, booking in review dates
- discuss how the parents/ carers can support their child
- keep parents/ carers up to date and fully informed of decisions about the support and interventions provided.

Parents/ carers will always be informed if their child is at risk of danger and children may choose to tell their parents and carers themselves. We give children the option of informing their parents/ carers about their mental health needs for themselves or of accompanying





and supporting them to do so. We make every effort to support parents and carers to access services where appropriate.

Our primary concern is the children, and in the rare event that parents and carers are not accessing services we will seek advice from the Local Authority or Children's Social Care. We also provide information for parents/ carers to access support for their own mental health needs.

#### **14. Staff wellbeing**

Storybrook is passionate about supporting the mental health and well-being of all members of the school community; this includes our staff. We work closely with all staff to gain their views and suggestions, and use this information to put in a robust support system, considering ways in which to reduce workload and pressure.

**Some of the ways in which we support staff well-being are:**

- Time to talk Tuesday - an opportunity to share thoughts, experiences and emotions in safe and supportive way
- Mental Health Support Team visit and drops in at least once each half term
- Supervision for adults supporting high needs pupils
- Adaptations to staffing plans to consider needs of staff
- Staff meeting time used for assessment and Individual Education Support Plans (as opposed to directed time)
- SLT proactively involved in all behaviour support across the school
- Playground cover from SLT once weekly (minimum)
- No emails are sent after 6pm by SLT to staff
- Food and refreshments for parents' evenings paid for by SLT
- Open door policy from SLT
- Parents evenings take place instead of CPD
- No staff meeting (CPD) during data deadline weeks for data entry additional to PPA (week after assessment window)
- Feedback policy limits marking

We aim to work closely with staff and a range of other professionals and educational settings to continue to develop our support for staff as we greatly value them.

#### **15. Staff training**

At Storybrook we want all staff to be confident in their knowledge of mental health and wellbeing and to be able to promote positive mental health and wellbeing, identify mental health needs early in children and know what to do and where to get help.

Our Senior Leadership Team ensure that all teachers have a clear understanding of the needs of all pupils in our specialist SEMH setting, and we dedicate numerous whole school CPD sessions each term, to mental and health and well-being in order to develop our knowledge and practice. These sessions help staff to develop their confidence in recognising common symptoms of mental health problems, understanding what represents a concern, and know what to do if they believe they have spotted a developing problem.





Staff receive regular reminders of the school's policies and processes and the Senior Leadership Team work hard to ensure that these are followed closely by all staff.

All staff must adhere to safer working practice principles at all times; the Headteacher will include continuous safeguarding training to ensure this is the case. Low-level concerns about staff conduct must be reported, recorded and addressed in line with the Safeguarding and Child Protection Policy; this is in relation to the SEMH policy, and all other instances.

### 16. Monitoring and review

Our SEMH policy has been created in the first instance by the Headteacher and SMHL but will be reviewed with input from all stakeholders, including the children we work with by gaining pupil voice. We will ensure that staff members and parents/ carers are invited to review the policy each year as part of a consultation process and that feedback is sought by the school regarding SEMH provision. We work alongside a range of other settings and professionals when creating our provision and support packages for SEMH and take an outward-facing approach to developing policies and procedures to ensure we can provide a robust and effective offer to our pupils.

The Headteacher is the designated policy owner responsible for implementation.

#### **To ensure best practice:**

- notes are kept up to date
- staff read and understand section one of Keeping Young people Safe in Education
- staff know our behaviour, SEMH, attendance and safeguarding policies and protocols
- the wider school community has an active voice about SEMH
- pupil feedback is gathered through discussions and Q&A sessions
- we monitor SEMH interventions and adjust where necessary
- all staff have training and the option of supervision to effectively support student SEMH
- staff and pupils are encouraged to speak to each other with courtesy, respect and empathy is essential.

We will evaluate the success of our policy through assessing pupils' progress and attainment, acquiring feedback from all stakeholders, analysing data over time to measure the impact of support and adapting where necessary, and through regular monitoring of quality first teaching with a view to promote positive well-being. The policy is reviewed on an annual basis by the Headteacher in conjunction with the governing body – any changes made to this will be discussed with our families. During the policy review, Storybrook's governing body will monitor its effectiveness and ensure compliance with statutory safeguarding and SEND duties.

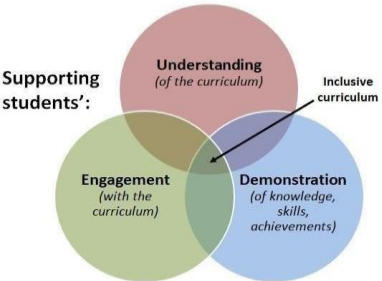


All members of staff are required to familiarise themselves with this policy as part of their induction programme and revisit this policy at the start of each academic year, with references to the policy shared and discussed throughout each term.

This policy applies to all staff, volunteers, visitors and professionals working within the school.





**Appendix 2: Storybrook’s Graduated Pupil-Centred Approach**

Key aims/ introduction	Graduated Approach: Assess, Plan, Do, Review	Pupil-centred approach
 <p>At Storybrook, we aim to provide an <b>aspirational, supportive and inclusive</b> environment for all pupils in an environment where our values kindness, curiosity, self-belief and pride are at the heart of all we do. We are committed to providing high-quality, inclusive education for every child in our setting and we believe that all pupils should have equal opportunities to access a broad and balanced curriculum in which their love for learning, independence and progress continue to grow.</p> <p>We are a specialist school that provides for pupils with a wide range of special needs, including difficulties with:</p> <ul style="list-style-type: none"> <li>• Cognition &amp; Learning Needs</li> <li>• Communication, speech, language and social communication</li> <li>• Social, emotional or Mental Health needs</li> <li>• Sensory and/or physical needs</li> </ul>	 <p><b>Assess:</b> A clear analysis of the pupil’s need in relation to SEND should be carried out and reviewed regularly. This will include teachers’ assessments and experiences of the pupil, their previous progress and attainment, the views of the pupil and their family and additional advice from the SENDCo and/or any external agencies.</p> <p><b>Plan:</b> Parents will be formally notified if their child is identified as having SEND. School will meet with the child and their family to agree support and expected impact on progress and development. This meeting should also identify a clear review date.</p> <p><b>Do:</b> The subject teachers remain responsible for working directly with these pupils each lesson. Pupils may also access 1:1 or group interventions with Teaching Assistants. Specialist staff from external agencies may also be called in to support pupils.</p> <p><b>Review:</b> The impact and quality of any interventions and support will be closely monitored to determine the impact they are having on pupil progress.</p>	 <p>The pupil or person-centred approach to inclusion is all about ensuring <b>children are at the heart of everything we do</b>. It is essential that pupils at our school, and their families, are involved in every decision about their support and provision.</p> <p>Person centred thinking and planning is all about <b>working in collaboration with all stakeholders in the best interests of the child</b>. All parties involved, including families, school staff and any other professionals will work together, taking the voice of the child when considering their strengths and difficulties, and using this to make plans, in line with the graduated approach. For example, when working with a young person it is crucial that what is learned about how the things they feel are helpful and supportive, and where they wish to go in their lives, is recorded and acted upon.</p>

